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Approved for use through 9/30/00. OMB 0651-0032

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PTO/SB/01 (12-97)

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	235/013.US
First Named Inventor	Bradford J. Duft
COMPLETE IF KNOWN	
Application Number	/
Filing Date	
Group Art Unit	
Examiner Name	

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole Inventor (if only one name is listed below) or an original, first and joint Inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHODS FOR TREATING OBESITY

the specification of which

is attached hereto
OR
 was filed on (MM/DD/YYYY) **06/05/1998**

(Title of the Invention)

as United States Application Number or PCT International

Application Number **PCT/US98/11753** and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or Inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or Inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

[Page 1 of 2]

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PTO/SB/028 (3-97)

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GSA GEN REG 27 CFR 1.26(g)(2) EDITION 05 2014 FEB 25

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DECLARATION — Supplemental Priority Data Sheet

Additional foreign applications:

Additional provisional applications:

Application Number	Filing Date (MM/DD/YYYY)

Additional U.S. applications:

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number <i>(if applicable)</i>

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any])		Family Name or Surname							
Orville G.		Kolterman							
Inventor's Signature	<i>Orville G. Kolterman</i>						Date	12/6/99	
Residence: City	Poway	State	CA	Country	US			Citizenship	US
Post Office Address	15793 Hidden Valley Drive								
Post Office Address									
City	Poway	State	CA	ZIP	92064	Country	US		
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])	Family Name or Surname								
Inventor's Signature									
Residence: City		State		Country				Date	
Post Office Address									
Post Office Address									
City		State		ZIP		Country			
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any])	Family Name or Surname								
Inventor's Signature									
Residence: City		State		Country				Date	
Post Office Address									
Post Office Address									
City		State		ZIP		Country			

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
08/870,762	06/06/1997	

Additional U.S. or PCT International application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 22249 → Place Customer Number Bar Code Label here

Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: Customer Number or Bar Code Label Correspondence address below

Name	Bradford J. Duit				
Address	LYON & LYON LLP				
Address	633 West Fifth Street, Suite 4700				
City	Los Angeles,	State	CA	ZIP	90071-2066
Country	U.S.	Telephone	(858) 552-8400	Fax	(213) 955-0440

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: A petition has been filed for this unsigned inventor

Given Name (first and middle if any) Bradford J.	Family Name or Surname Duit
---	--------------------------------

Inventor's Signature 	Date 8 Dec 99		
Residence: City Rancho Santa Fe	State CA	Country US	Citizenship US
Post Office Address P.O. Box 1133			
Post Office Address Rancho Santa Fe	State CA	Zip 92067	Country US

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

FORM PTO-1619A <small>Expires 06/30/99 OMB 0651-0027</small>		U.S. Department of Commerce Patent and Trademark Office PATENT	
RECORDATION FORM COVER SHEET PATENTS ONLY			
<small>TO: The Commissioner of Patents and Trademarks: Please record the attached original document(s) or copy(ies).</small>			
Submission Type		Conveyance Type	
<input checked="" type="checkbox"/> New <input type="checkbox"/> Resubmission (Non-Recordation) Document ID# <input type="text"/> <input type="checkbox"/> Correction of PTO Error Reel # <input type="text"/> Frame # <input type="text"/> <input type="checkbox"/> Corrective Document Reel # <input type="text"/> Frame # <input type="text"/>		<input checked="" type="checkbox"/> Assignment <input type="checkbox"/> Security Agreement <input type="checkbox"/> License <input type="checkbox"/> Change of Name <input type="checkbox"/> Merger <input type="checkbox"/> Other <input type="text"/> <div style="text-align: center; margin-top: 10px;"> U.S. Government <small>(For Use ONLY by U.S. Government Agencies)</small> </div> <input type="checkbox"/> Departmental File <input type="checkbox"/> Secret File	
Conveying Party(ies)			
<input type="checkbox"/> Mark if additional names of conveying parties attached			<small>Execution Date Month Day Year</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/06/99</div>
Name (line 1) <input type="text"/> Bradford J. Duff Name (line 2) <input type="text"/>			<small>Execution Date Month Day Year</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/06/99</div>
Second Party			
Name (line 1) <input type="text"/> Orville G. Kolterman Name (line 2) <input type="text"/>			<small>Execution Date Month Day Year</small> <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/06/99</div>
Receiving Party			
<input type="checkbox"/> Mark if additional names of receiving parties attached			<small>If document to be recorded is an assignment and the receiving party is not domiciled in the United States, an appointment of a domestic representative is attached. (Designation must be a separate document from Assignment.)</small>
Name (line 1) <input type="text"/> Amylin Pharmaceuticals, Inc. Name (line 2) <input type="text"/>			<div style="display: flex; justify-content: space-between;"> City State/Country Zip Code </div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">CA</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">92121</div>
Domestic Representative Name and Address			
<small>Enter for the first Receiving Party only.</small>			
Name <input type="text"/> Address (line 1) <input type="text"/> Address (line 2) <input type="text"/> Address (line 3) <input type="text"/> Address (line 4) <input type="text"/>			
FOR OFFICE USE ONLY			

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Mail documents to be recorded with required cover sheet(s) information to:
 Commissioner of Patents and Trademarks, Box Assignments, Washington, D.C. 20231

FORM PTO-1619B Expires 06/30/99 OMB 0651-0027		Page 2	U.S. Department of Commerce Patent and Trademark Office PATENT	
Correspondent Name and Address		Area Code and Telephone Number (858) 552-8400		
Name	Bradford J. Duft			
Address (Line 1)	LYON & LYON LLP			
Address (Line 2)	633 West Fifth Street, Suite 4700			
Address (Line 3)	Los Angeles, CA 90071-2066			
Address (Line 4)				
Pages	Enter the total number of pages of the attached conveyance document including any attachments.			# 4
Application Number(s) or Patent Number(s)				
<input type="checkbox"/> Mark if additional numbers attached Enter either the Patent Application Number or the Patent Number (DO NOT ENTER BOTH numbers for the same property).				
Patent Application Number(s)		Patent Number(s)		
<input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/>		
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<input type="text"/> <input type="text"/> <input type="text"/>				
If this document is being filed together with a new Patent Application, enter the date the patent application was signed by the first named executing Inventor.				
Month <input type="text"/> Day <input type="text"/> Year <input type="text"/>				
Patent Cooperation Treaty (PCT)				
Enter PCT application number PCT US98/11753 PCT <input type="text"/> PCT <input type="text"/> only if a U.S. Application Number PCT <input type="text"/> PCT <input type="text"/> PCT <input type="text"/>				
Number of Properties Enter the total number of properties involved. # 1				
Fee Amount Fee Amount for Properties Listed (37 CFR 3.41): \$ 40.00				
Method of Payment: Deposit Account <input type="checkbox"/> Enclosed <input type="checkbox"/> Deposit Account <input checked="" type="checkbox"/> <small>(Enter for payment by deposit account or if additional fees can be charged to the account.)</small>				
Deposit Account Number: # 12-2475				
Authorization to charge additional fees: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
Statement and Signature				
<i>To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document. Charges to deposit account are authorized, as indicated herein.</i>				
Bradford J. Duft				12/6/99
Name of Person Signing		Signature		Date

ASSIGNMENT OF PATENT APPLICATION

WHEREAS, WE, BRADFORD J. DUFT, a citizen of UNITED STATES, and ORVILLE G. KOLTERMAN, a citizen of UNITED STATES (hereinafter referred to as "ASSIGNORS"), have invented and own a certain invention entitled METHODS FOR TREATING OBESITY for which application for Letters Patent of the United States of America has been executed on even date herewith based on International Application No. PCT/US98/11753, filed June 5, 1998; and

WHEREAS, AMYLIN PHARMACEUTICALS, INC., a corporation organized and existing under and by virtue of the laws of the State of Delaware and having its principal place of business at 9373 Towne Centre Drive, San Diego, CA 92121 (hereinafter referred to as "ASSIGNEE"), is desirous of acquiring the exclusive right, title and interest in, to and under said invention and in, to and under any Patent or similar legal protection to be obtained therefor in the United States of America, its territorial possessions and in any and all countries foreign thereto.

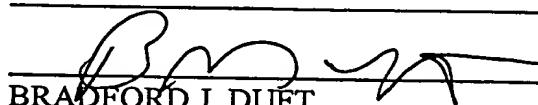
NOW, THEREFORE, for good and valuable consideration, the receipt of which is hereby acknowledged, ASSIGNORS hereby sell, assign, transfer and set over unto the said ASSIGNEE, its successors and assigns, the full and exclusive right, title and interest to said invention and to all Letters Patent or application or similar legal protection, not only in the United States and its territorial possessions, but in all countries foreign thereto to be obtained for said invention by said application, and to any continuation, division, renewal, substitute or reissue thereof or any legal equivalent thereof in the United States or a foreign country for the full term or terms for which the same may be granted, including all priority rights under the International Convention; and ASSIGNORS hereby authorize and request the Commissioner of Patents and Trademarks to issue

said Letters Patent or any legal equivalent thereof to said ASSIGNEE, its successors and assigns, in accordance with this Assignment.

ASSIGNORS hereby covenant that no assignment, sale, agreement or encumbrance has been or will be made or entered into which would conflict with this Agreement;

ASSIGNORS further covenant that ASSIGNEE will, upon its request, be provided promptly with all pertinent facts and documents relating to said application, said invention and said Letters Patent and legal equivalents as may be known and accessible to ASSIGNORS and will testify as to the same in any interference or litigation related thereto and will promptly execute and deliver to ASSIGNEE or its legal representative any and all papers, instruments or affidavits required to apply for, obtain, maintain, issue and enforce said application, said invention and said Letters Patent and said equivalents in the United States or in any foreign country, which may be necessary or desirable to carry out the purposes thereof.

WITNESS my hand at San Diego,
California, this 6th day of December, 1999.


BRADFORD J. DUFT

STATE OF CALIFORNIA)

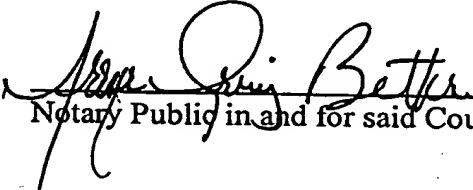
) ss
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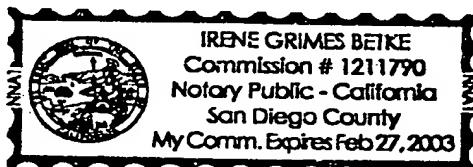
COUNTY OF SAN DIEGO)

On Dec. 6, 1999 before me, IRENE GRIMES BETKE, BRADFORD J. DUFT, personally appeared
BRADFORD J. DUFT

personally known to me - OR - proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.


Notary Public in and for said County and State



WITNESS my hand at San Diego,
California, this 6th day of December, 1999.

Orville G. Kelterman
ORVILLE G. KELTERMAN

STATE OF CALIFORNIA)
) ss

COUNTY OF SAN DIEGO)

On 12/6/99 before me, Notary Public, personally appeared
Orville G. Kelterman

personally known to me - OR - proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Amanda J. Halverson
Notary Public in and for said County and State

